DUST & SON AUTO SUPPLIES

Application for Employment



AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

"DISCRIMINATION BECAUSE OF SEX, RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, DISABILITY OR VETERAN STATUS IS PROHIBITED."

General Information: (Please fill out in full)

Name:				
Address:				
Street		City	State	Zip
Telephone: Home ()	Other()		
Position Applied for:		Department		
Full Time [] Part Tim	e[] Temporary[] I	Hours Available		
Salary Requirements:		Date Ava	ailable	
How were you referred	to us?			
Are you a United States	Citizen? If r	not, list type of visa and	l number which	verifies
your right to be employ	ed in the U.S			
Have you ever been emp	ployed by our compan	y?		
Do you have any relativ	es employed by our co	ompany?		
How much time have yo	ou lost from work or se	chool during the past 2	years?	
Year (s)	Number of days	s lost Reason(s) for lost time	

EMPLOYMENT HISTORY: Please list all present and past employment leaving no lapse in time. List most recent or current employer first. Include self-employment, summer and part-time jobs.

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1) Company		Address		Telephone	
Date Employed	From	То	Starting Salary	Leaving Salary	Supervisor
Title: Responsibilities: Reason for leaving	g:				
2) Company			Address		Telephone
Date Employed	From	То	Starting Salary	Leaving Salary	Supervisor
Title: Responsibilities: Reason for leaving	g:				
3) Company			Address		Telephone
Date Employed	From	То	Starting Salary	Leaving Salary	Supervisor
Title: Responsibilities: Reason for leaving	g:				
4) Company			Address		Telephone
Date Employed	From	То	Starting Salary	Leaving Salary	Supervisor
Title: Responsibilities: Reason for leaving	g:				
5) Company		Address		Telephone	
Date Employed	From	То	Starting Salary	Leaving Salary	Supervisor
Title: Responsibilities: Reason for leaving	g:				
6) Company			Address		Telephone
Date Employed	From	То	Starting Salary	Leaving Salary	Supervisor
Title: Responsibilities: Reason for leavin	g:				
May we contact the	above employers for	or reference checkin	ng purposes?		

Please identify by number any employer you do not wish us to contact._

ADDITIONAL BAG	CKGROUND		Jo	OB EXPERIENC	YE .		
[] Personal Compute	r [] Receptionist		[] Equipment Repair/Installation				
[] Forklift		[] Accounts Payable/Receivable		able [] Sho	e [] Shop Manager		
[] CDL		[] Driver [] Road Salesman			nd Salesman		
[] Other		[] Wa	arehouse	[] Sto	[] Store Manager		
[] Other		[] Parts / Paint Counter [] Other			er Management		
Other experience rela	ted to this appli	cation: (please explain)				
Education	T			T			
Name	Address		Major/Course Subject	Select Last Year Complet	Degree		
High School/Prep							
Technical School							
Business School							
College							
Graduate Work							
Other (describe)							
Additional classes, train	ning or skills			<u> </u>	I		
f you did not graduate	, why did you le	ave scho	ool or college?				
Are you planning to pu	rsue further stud	lies? Ye	es No D	Day School	Night School		
f so, when, where and	what courses?_						
References: Please	list information	below f	or three references, ex	cluding relatives a	and former employers		
Name	Address		Telephone	Occupation	# years known		
			Telephone	Occupation	# years known		
2 Name	Address						
2 Name 3.	Address		rerephone	-	J		

NOTICE TO APPLICANTS AS REQUIRED BY THE FAIR CREDIT REPORTING ACT (15 U.S.C.SEC.1681)

In connection with your application (for employment, promotion, etc.) a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.

ACKNOWLEDGEMENTS AND AGREEMENTS

I, the undersigned, hereby apply for employment with the company. I understand that any employment offered me will be on a trial basis and probationary status for a period of NINETY (90) calendar days, from my date of hire, and any continued employment will be based upon a satisfactory performance review within this period.

I, the undersigned, have never been convicted of a felony.

I hereby authorize all educational institutions, individuals, law enforcement agencies, companies and their representatives and credit bureaus to supply any information regarding my qualifications and previous employment for purposes of employment and continued fitness for employment, and I release them, and the company from all related liability.

I acknowledge information concerning my performance as an employee, as well as information concerning my personal habits, conduct, deportment, as well as the information outlined herein will assist me in obtaining employment with the company. I hereby agree to release and hold harmless **Dust & Son Auto Parts**, its' agents, employees, affiliated corporations, subsidiaries, successors and assigns from all liability in anyway related to the investigation of my suitability for employment, including, but not limited to any liability relating to contact and/or discussions with any of my employers, relatives, and/or acquaintances.

I agree to take a physical examination at any time, at the option of the company at no personal expense. I also agree that the examining physician may disclose to the company or its representatives, the results of such examination. I understand that my continued employment may be conditioned on the findings of this examination, if requested.

I understand that I will be expected to present proof of my age after I am employed and may be required to provide proof of a valid operator's/chauffeur's license and insurability, at any time, if I am required to drive on company business.

I understand that the company can make no guarantee as to the number of hours that I may be assigned from week to week and any reduction in hours can affect my compensation and benefits. I also understand that I may be required to change days off and scheduled hours on a temporary or a regular basis in order to continue my employment. Also, I understand the company reserves the right to transfer me, as business necessitates, and my continued employment may be predicated upon my acceptance of said transfer. Further, I understand that evenings and/or weekends be part of any schedule I may be assigned.

The facts set forth in this application are true and complete. I understand that false statements and misrepresentation or omission of facts will be sufficient cause for cancellation of consideration for employment or dismissal from the company's service if I have already been employed.

In consideration of my employment, I agree to conform to the rules of the company and my employment and compensation can be terminated, with or without cause and without notice, at any time, at the option of the company or myself. I understand that no one other than the President has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the forgoing. Further, any such agreement must be in writing.

I agree that I have read and understand the above acknowledgements and agreements and recognize all of the above as conditions of employment.

Addendum Required

Signature_______Date_____

Locations

Please place a check next to the location you wish to apply at:

Effingham Macon County
748 E. Prairie St.
Decatur, IL 62523 Macon County Salem 201 S. Banker St. Westgate Subdivision Effingham, IL 62401 Salem, IL. 62881 217-342-2147 Effingham Warehouse
Park St. 217-422-2506 618-548-3043 Grayville Sullivan 136 Industrial Park Dr. Grayville, IL 62844 618-375-4311 215 S. Hamilton St. Sullivan, IL. 61951 217-342-3011 217-728-7378 Coles County Marion Champaign County 1702 1509 W. Kimmel St. Marion, IL. 62959 6057 Park Drive N. Cunningham Ave. Charleston, IL 61920 Urbana, IL. 61802 217-348-0167 618-997-1162 217-328-3431